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ATTORNEY'S DOCKET NUMBER										
32488										
U.S. APPLICATION NO. (IF KNOWN), SEE 37 CFR										
10/591442										
PRIORITY DATE CLAIMED March 4, 2004										
Water 4, 2004										
QUANTIFYING AND PROFILING ANTIBODY AND T CELL RECEPTOR GENE EXPRESSION										
(1) Dena LESHKOWITZ										
Applicant herewith submits to the United States Designated/Elected Office (DO/EO.US) the following items and other information:										
 This is a FIRST submission of items concerning a filing under 35 U.S.C. 371. This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 U.S.C. 371. This is an express request to begin national examination procedures (35 U.S.C. 371(f) at any time rather than delay examination until the expiration of the applicable time limit set in 35 U.S.C. 371(b) and PCT Articles 22 and 39(1). A proper Demand for International Preliminary Examination was made by the 19th month from the earliest claimed priority date. A copy of the International Application as filed (35 U.S.C. 371(3)(2) is transmitted herewith (required only if not transmitted by the International Bureau). is not required, as the application was filed in the United States Receiving Office (RO/US). A translation of the International Application into English (35 U.S.C. 371(3)(2). A copy of the International Search Report (PCT/ISA/210) and Written Opinion (PCT/ISA/237). Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3)										
nce with 37 CFR 3.28 and 3.31 is included. Entical to the written (on paper or compact disc)										

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INTERNATIONAL APPLICATION NO. PCT/IL2005/000263

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THE FILING FEE HAS BEEN CALCULATED AS SHOWN BELOW:

FOR:	Column 1 No. FILED	Column 2 No. EXTRA	SMALL EN	NTITY	OTHER THAN A SMALL ENTITY	
	No. 11EED	No. Extro	RATE	FEE	RATE	FEE
Basic National Stage Fee				\$ 150		\$ 300
National Stage Search Fee				\$ 250		\$ 500
National Stage Examination Fee				\$ 100		\$ 200
National Stage Application Size Fee (Per 50 Pages Over 100)			0 x \$ 125	\$	0 x \$250	\$0
Multiple Dependent Claim		-	0 x \$ 180	\$	0 x \$ 360	\$0
Total Claims*	20 - 20=	0	0 x \$ 25	\$	0 x \$50	\$0
Independent Claims*	3 - 3=	0	0 x \$100	\$	0 x \$200	\$0
* (If the difference in Column 1 is	less than "0", enter	"0" in Column 2)	TOTAL	\$500.	TOTAL	<u>\$ 0</u>

×	Please	cha	rge	my	deposit	ac	cou	nt I	No.	5Ō-	1407	in	the amount	of \$500.
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A duplicate copy of this sheet is enclosed.

The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No 50-1407. A duplicate copy of this sheet is enclosed.

- Any additional filing fees required under 37 CFR 1.16.
- Any patent application processing fees under 37 CFR 1.17.
- The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to deposit Account No. 50-1407. A duplicate copy of this sheet is enclosed.
 - Any patent application processing fees under 37 CFR 1.17.
 - Any filing fees under 37 CFR 1.16 for presentation of extra claims.

NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.

SEND ALL CORRESPONDENCE TO:

Martin D. Moynihan PRTSI, Inc. P.O. Box 16446 Arlington, Virginia 22215

Tel: (703) 598-7851 Fax: (703) 415-4864

Martin D. Mapuhan SIGNATURE

Martin D. Moynihan

NAME

40,338

REGISTRATION NUMBER

August 30, 2006

DATE